

2019 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F97000006931

Entity Name: HUMANA PHARMACY, INC.**Current Principal Place of Business:**500 W. MAIN STREET
LOUISVILLE, KY 40202**Current Mailing Address:**P.O. BOX 740026
LOUISVILLE, KY 40201-7426**FEI Number:** 61-1316926**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title VICE PRESIDENT AND TREASURER
Name BAILEY, ALAN J
Address 500 W. MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

Title DIRECTOR
Name BROUSSARD, BRUCE
Address 500 W. MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

Title INTERIM PRESIDENT
Name GREENWELL, SCOTT A
Address 500 W. MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

Title CHIEF INFORMATION OFFICER
Name LECLAIRE, BRIAN
Address 500 W. MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

Title SENIOR VICE PRESIDENT, TAX
Name ROBINSON, HANK
Address 500 W. MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

Title DIRECTOR
Name FLEMING, WILLIAM K
Address 500 W. MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

Title DIRECTOR, CFO
Name KANE, BRIAN
Address 500 W. MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

Title VICE PRESIDENT, INVESTMENTS
Name PRESTON, WILLIAM MARK
Address 500 W. MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: C. BROOKS NEWMANSENIOR VICE
PRESIDENT, DEPUTY
GENERAL COUNSEL AND
CORPORATE
SECRETARY

06/18/2019

Officer/Director Detail Continued :

Title VICE PRESIDENT
Name WILSON, RALPH
Address 500 W. MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

Title SENIOR VICE PRESIDENT, DEPUTY GENERAL
COUNSEL & CORPORATE SECRETARY
Name NEWMAN, C BROOKS
Address 500 W. MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

Title VICE PRESIDENT, CHIEF COMPLIANCE OFFICER
Name O'REILLY, SEAN J
Address 500 WEST MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

Title ASSISTANT GENERAL COUNSEL & ASSISTANT
CORPORATE SECRETARY
Name RUSCHELL, JOSEPH M.
Address 500 WEST MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

Title SENIOR VICE PRESIDENT, CHIEF
ACCOUNTING OFFICER &
CONTROLLER
Name ZIPPERLE, CYNTHIA H
Address 500 W. MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

Title VICE PRESIDENT
Name EDWARDS, DOUGLAS
Address 500 WEST MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

Title SENIOR LEGAL PROFESSIONAL &
ASSISTANT CORPORATE
SECRETARY
Name DURALL, COURTNEY D.
Address 500 WEST MAIN STREET
City-State-Zip: LOUISVILLE KY 40202